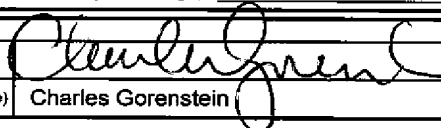


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<p><i>Effective on 12/08/2004.</i> FEE TRANSMITTAL For FY 2009</p>		<p>Complete if Known</p>													
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/553,969-Conf. #9996</td> </tr> <tr> <td>Filing Date</td> <td>October 19, 2005</td> </tr> <tr> <td>First Named Inventor</td> <td>Peter KERN</td> </tr> <tr> <td>Examiner Name</td> <td>S. Tawfik</td> </tr> <tr> <td>Art Unit</td> <td>3721</td> </tr> <tr> <td>Attorney Docket No.</td> <td>5707-0102PUS1</td> </tr> </table>		Application Number	10/553,969-Conf. #9996	Filing Date	October 19, 2005	First Named Inventor	Peter KERN	Examiner Name	S. Tawfik	Art Unit	3721	Attorney Docket No.	5707-0102PUS1
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<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">TOTAL AMOUNT OF PAYMENT</td> <td style="width: 50%;">(\$) 104.00</td> </tr> </table>		TOTAL AMOUNT OF PAYMENT	(\$) 104.00												
TOTAL AMOUNT OF PAYMENT	(\$) 104.00														

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	330	165	540	270	220	110	_____
Design	220	110	100	50	140	70	_____
Plant	220	110	330	165	170	85	_____
Reissue	330	165	540	270	650	325	_____
Provisional	220	110	0	0	0	0	_____
2. EXCESS CLAIM FEES							
<u>Fee Description</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>					
Each claim over 20 (including Reissues)	52	26					
Each independent claim over 3 (including Reissues)	220	110					
Multiple dependent claims	390	195					
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
26	- 24 = 2	x 52.00 =	104.00	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
HP = highest number of total claims paid for, if greater than 20.							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
6	- 6 =	x	=				
HP = highest number of Independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
_____	- 100 = _____	/ 50 = _____	(round up to a whole number) x _____	=			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)				<u>Fees Paid (\$)</u>			
Other (e.g., late filing surcharge): _____							

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	29,271
Name (Print/Type)	Charles Gorenstein	Telephone	(703) 205-8000
		Date	October 6, 2008